Community Health Profile
Resource Guide

Missouri Department of Health and Senior Services
Version 12/9/2002

This guide is a supporting supplement to the **Community Health Profile Tools** for agencies conducting community health assessment. This guide features embedded links to websites, documents and/or entities to assist in locating county specific data and information.

Quick Index and Bookmarks

General Population and Socio Indicators

1 Demographics
a)   Age
b)   Gender
c)   Marital Status
d)   Race/Ethnicity
e)   Non English Speaking Students in School
f)   Geographic Distribution of Population
g)   Population Increase or Decrease
h)   Density of Population

2 Education
a)   Education Levels
b)   High School Graduation Rate
c)   Drop Out Rate
d)   Literacy

3 Socio-Economic
a)   Average Household Income
b)   Per Capita Income
c)   Participation in Free/Reduced Cost School Food Programs
d)   Single Parent Households
e)   Percent of Population at or Below Poverty Level
f)   Assessed Valuation
g)   Leading Industry
h)   Transfer Payments
i)   Unemployment Rate

Health Risk Indicators

4 Environment
a)   Age of Housing
b)   Lead Abatement Projects
c)   Food Borne Outbreaks
d)   Communicable Disease Outbreaks
e)   Water Quality
f)   Water Fluoridation
g)   Air Quality
h)   Solid Waste

5 Public Safety
a)   Homicide Rate
b)   Overall Crime Rate
c)   Violent Crime Rate
d)   Juvenile Crime Rate
e)   Seat Belt / Child Safety Seat Use
f)   Illegal Drug Use
g)   DWI Arrest Rate
h)   Assault Injury
i)   Self- Inflicted Injury

6 Family/Domestic Violence
a)   Child Abuse and Neglect
b)   Child Out-of-Home Placement
c)   Domestic Partner Violence
d)   Elder Abuse and Neglect

7 Unintended Injury Indicators
a)   Work-related Injuries
b)   Alcohol and Drug-related Traffic Accidents
c)   Motor Vehicle Accident Injuries
d)   Unintentional Injuries
e)   Firearm Injuries

8 Maternal and Child Health
a)   Unintended Pregnancies
b)   Smoking During Pregnancy
c)   Immunization Rate
d)   Low Birth Weight
e)   Birth Defects
f)   Number of Birth to Teens
g)   Number of Births to Women Over 40
h)   Rate of Multiple Births
i)   Births to Women Without High School Education
j)   Prenatal Care
k)   Repeat Pregnancies Under Age 20
l)   Birth Spacing Less Than 18 Months
m)   Child Emergency Room Visits
n)   Cause of Child Hospitalizations
o)   Lead Testing Rates / Percentage Elevated

9 Infectious Disease Rates
a)   HIV / AIDS
b)   Sexually Transmitted Diseases
c)   Communicable Disease
d)   Salmonella
e)   Tuberculosis
f)   Influenza/Pneumonia
g)   Other Vaccine-Preventable Diseases
h)   Hepatitis A
i)   E-Coli H-0157

10 Nutrition
a)   Pregnant Women Achieving Proper Weight Gain
b)   Breast Feeding Rates
c)   Potential Eligible being served by WIC
d)   Iron Deficiency Anemia among WIC Population
e)   Obesity
f)   Daily Consumption of Fruits and Vegetables
g)   Senior Nutrition Sites
h)   Participation in Food Assistance Programs
i)   % of individuals with cvd eating low fat diet
j)   % of individuals with cvd exercising more
k)   % of individuals diagnosed with diabetes
l)   % of babies born with neural tube defects

11 Chronic Disease	**13 Health Care System** (continued)
a) Smoking Rates (Teens and Adults)	g) Emergency Medical Services Response time / Distance to Care
b) Sedentary Lifestyle / Physical Activity	h) Hospitals in the County
c) Cause of Hospitalization	i) Nursing Homes
d) Persons with Functional Limitations	j) Access top Tertiary Care
12 Mortality	k) Home Health Care
a) All Cancers	l) 911 Service
b) Breast Cancer	m) Reproductive Health Services
c) Cardiovascular Disease	n) Local Enforcement of Laws Regarding Tobacco Sales to Minors
d) Cerebrovascular Disease (Stroke)	o) Public Transportation
e) Pulmonary Disease (COPD)	**14 Community Health Resources**
f) Infant Mortality	a) Recreational/Exercise Facilities/Opportunities
g) Alcohol Related	b) Drug and Alcohol Treatment
h) Substance Abuse	c) Smoking Cessation
i) Suicide	d) Health Education Opportunities
j) Unintentional Injury Death Rate	e) Wellness/Prevention Programs
k) Child Deaths	f) Summer Feeding Sites
l) Diabetes	g) Services for those with Physical Disability
	h) Food Pantry Resources
Community Health Improvement Capacity Indicators	i) Crisis Centers
13 Health Care System	j) Community Coalition/Partnership
a) Physician/Patient Ratios	k) School Nurse/Student Ratio
b) Access to Medicaid Providers	
c) Access to Dental Services	
d) Access to Mental Health Services	
e) Availability of Other Health Care Manpower	
f) Medically Uninsured Population	

Hard Data/Soft Data:

How they help you build strong proposals

General Population and Socio Indicators

1 Demographics

Census 2000 –

1a-b Age and Gender

Age is used to provide detail about the nature of the population. For example: "The average age of the population is 24.3 years, and that average has increased by 5 percent over the last ten years." Age also plays a role in the computation of accurate rates. A rate is a statistic that provides information about the extent of a problem in a population.

The gender distribution in a population helps us understand issues that differentially affect men and women. It is used to provide detail about the nature of the population. For example: "The female/male ratio in the population is 54:46."

Preferred Data Source: MCDC/OSEDA Missouri County Data Map http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **SF3 Based Related Trend Report 1990 – 2000**.

1c Marital Status

Understanding the distribution in a population by marital status help us understand issues that differentially affect people who are single, married, never married, divorced and widowed. If we calculate the rate of depression for the entire population, it would give a very different number than if the rate were calculated by marital status. Calculating these rates by marital status can help us track tends in the population.

Preferred Data Source: MCDC/OSEDA Missouri County Data Map
http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **SF3 Based Related Trend Report 1990 – 2000**.

Alternate Data Source: *Census 2000 Summary File 1 for Missouri*
http://mcdc2.missouri.edu/webrepts/sdcprofiles1/mo/ Census 2000 Summary File 1 - State Data Center Profiles – Select **County**

1d Race/Ethnicity

The race distribution in a population can help us understand issues that differentially affect members of these groups. It is clear that morbidity and mortality, as well as other issues related to quality of life are different among racial groups.

Preferred Data Source: MCDC/OSEDA Missouri County Data Map
http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **SF3 Based Related Trend Report 1990 – 2000**.

Alternate Data Sources:
demographic Profiles.xls Excel spreadsheet that contains detailed 2000 population data for Missouri. The population data is separated by area, gender, age, race, and ethnic background. Also, this data set contains household and housing information for each area in Missouri.

1e Non-English speaking students in school system

Preferred Data Source: *Kids Count in Missouri 2001- Key Facts By County (OSEDA)*
http://www.oseda.missouri.edu/kidscount/01/facts/html/ - Select your **County** then select **Limited English Students, 1998/2000.**

1f Geographic Distribution of Population

Preferred Data Source: MCDC/OSEDA Missouri County Data Map
http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **Related Geographic Comparison Reports (Menu)** then select **1. Total Population Trends** and open as a PDF file or CSV file (Adobe Acrobat Reader and or MS Excel.

1g Population Increase or Decrease

Preferred Data Source: MCDC/OSEDA Missouri County Data Map
http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **Related Geographic Comparison Reports (Menu)** then select

1. Total Population Trends and open as a PDF file or CSV file (Adobe Acrobat Reader and or MS Excel.

1h   Density of Population

      Preferred Data Source: *MSCDC Demographic Trend Report 1 for Missouri Counties* http://mcdc2.missouri.edu/websas/dp1_2kmenus/mo/Counties.html - Select your county then scroll down to the ***bottom of the page*** to section **9. Miscellaneous**

2 Education

      (((http://www.dese.state.mo.us/planning/profile/ - This rich school-data resource is made available by the Missouri State Department of Elementary and Secondary Education and their School Core Data Section. These Profiles include all Missouri School Districts. Division of School Improvement, School Core Data, Tom Ogle, Director - Phone: (573) 751-8271 - Fax: (573) 526-0651)))

      Missouri School Districts – Sorted by County

2a   Education Levels of Persons 25 and older

      Persons Over 25

      Preferred Data Source: MCDC/OSEDA Missouri County Data Map http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **SF3 Based Related Trend Report 1990 – 2000** and scroll down to **13. Educational Attainment.**

2b High School Graduation Rate

      Tracking the graduation rate of high school students in your community is important. As skill demands increase in the workforce, people without a high school diploma will have a more difficult time finding employment or advancing beyond low wage jobs. Tracking this rate can help you understand the preparedness of your community's citizens to participate in all aspects of community life.

      Preferred Data Source: http://www.dese.state.mo.us/planning/profile/ - Select and load school district profile then select ***Graduation Rates**. Definition and Source is provided on the site.

      Alternate Data Sources: *Kids Count in Missouri 2001- Key Facts By County (OSEDA)* http://www.oseda.missouri.edu/kidscount/01/facts/html/ - Select your **County** then select **High school graduation rate, 1996/2000.**

2c Drop-out Rate

> While possession of a high school diploma no longer guarantees easy access to jobs, lack of a diploma or its equivalent almost certainly means that an individual will experience difficulty entering the labor market and will be at pronounced educational, social, and economic disadvantages throughout his or her life. School drop out rates are not equivalent to high school graduation rates, but are independent measures of satisfaction with school.

> **Preferred Data Source: Annual Dropout Rate 1998-2002**
> http://www.dese.state.mo.us/planning/profile/ - Select and load **school district profile** then select **Dropouts**. Definition and Source are provided on the site. Broken out by school district…there is no aggregate for all the county school districts.

> **Alternate Data Sources:** *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.*
> http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under School Attendance select **Drop-out Rate,** available for school years 1998, 1999, 2000, 2001**.**

2d Literacy

> People with middle or high literacy levels are more likely to vote, be employed, and avoid dependence on public assistance.
> **Preferred Data Source:**
> http://www.dese.state.mo.us/planning/profile/ - Select and load **school district profile** then select **MMAT Reading Quintile Data**.

> **Alternate Data Sources:**
> http://www.casas.org/lit/litcode/Search.cfm - Estimates of Adult Literacy Proficiency are presented here as a Database of Synthetic Estimates. These estimates combine information from the National Adult Literacy Survey (NALS) and the 1990 U.S. Census to estimate adult literacy proficiencies in geographical areas not adequately sampled by NALS. These areas include many states, congressional districts, counties, large towns, and cities. **Select Missouri and County** for search.

3 Socio-Economic

3a Average/Median Household Income

> **Preferred Data Source:** MCDC/OSEDA Missouri County Data Map
> http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **SF3 Based Related Trend Report 1990 – 2000**.

3b Per Capita Income

Per Capita Income is dependent on the level of pay and the number of people working. A larger income for a community creates greater degrees of choice. The larger the total income of a community, the more opportunities available for residents. Individuals can decide how to improve their lives with the payroll they receive, and the community can decide how they can collectively increase well being through the spending of taxes.

Preferred Data Source: *Missouri Department of Economic Development – 2000 County Per Capital Income.* http://www.ded.state.mo.us/business/researchandplanning/indicators/wages/pci00county.shtml . Tables and Maps for comparison and trend reporting.

3c Participation in Free/Reduced Cost School Food Programs

Preferred Data Source: http://www.dese.state.mo.us/reportsummary/districts/. DESE now makes available a "Report Card" for each Missouri School District. The report card provides data on a variety of education and health indicators with state comparison. Select a **School District.**

3d Single Parent Households

Preferred Data Source: MCDC/OSEDA Missouri County Data Map http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **SF3 Based Related Trend Report 1990 – 2000**. Select section **5. Households by Type.**

3e Percent of Population At or Below Poverty Level

The number of people living below the level of poverty is an indicator of need. Residents in this situation are less able to satisfy their needs and as a result the community is beneath the optimal level of economic health. All residents suffer from the incidence of individual poverty because the community does not reach the potential that is possible when all members both receive and contribute their potential. *Click here for* **Poverty In Missouri.**

Preferred Data Source: MCDC/OSEDA Missouri County Data Map http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **SF3 Based Related Trend Report 1990 – 2000**. Select section **22. Poverty.**

http://www.census.gov/hhes/poverty/threshld/thresh00.html - Poverty Thresholds in 2000, by Size of Family and Number of Related Children Under 18 Years. Provided by US Census Bureau. http://www.census.gov/hhes/poverty/povdef.html - How the Census Bureau Measures Poverty.

3f Assessed Valuation

Preferred Data Source:

http://www.dese.state.mo.us/reportsummary/districts/. DESE now makes available a "Report Card" for each Missouri School District. The report card provides data on a variety of education and health indicators with state comparison. Select a School District.

Alternate Data Sources:
DHSS Community Data Profiles - Select **County**, select **General Information**.

3g Leading Industry

Preferred Data Source:
http://mo.works.state.mo.us/lmi/owa/adb.area1 - Select a **County**. This information by county presents the user with a very well structured economic picture of any selected Missouri county with links to 1990 population census data, industry employment and wages. Top Employers are listed by sector.

3h Transfer Payments

Preferred Data Source:
http://www.oseda.missouri.edu/countypage - Select your **County**. Under **Business and Economics** go to **Transfer Payments**.

3i Unemployment Rate

The economic health of a community can most simply be measured by total income or output. Total income, which must be equal to total output, is the addition of all of the paychecks received by members of a community. A larger income for a community creates greater degrees of choice by making more opportunities available for residents. Individuals can decide how to improve their lives with the payroll they receive, and the community can decide how they can collectively increase well being through the spending of taxes.

Preferred Data Source:
http://mo.works.state.mo.us/lmi/owa/adb.area1 - Select **county** by highlighting it on the map. Current month information is provided. Select **Labor Force Unemployment** on the left side of the screen to view annual data from 1991-2000.

Health Risk Indicators

4 Environment

4a Age of Housing
Housing built before 1950 will likely have lead-based paint. Lead can be harmful to people, especially children.

> **Preferred Data Source:** MCDC/OSEDA Missouri County Data Map
> http://mcdc2.missouri.edu/webrepts/mocntymap.html - Use your mouse to point and click on your county. Now select **SF3 Based Related Trend Report 1990 – 2000**. Select section **27. Age of Structure.**

4b Lead Abatement Projects

> Local data

4c Food Borne Outbreaks

> Local data

4d Communicable Disease Outbreaks

> Local data

4e Water Quality

> Clean fresh water is essential for human survival. We need water for drinking and cooking, for public works, for irrigation of crops, for showering and watering lawns, and for dozens of other uses. Groundwater is often the primary source of drinking water for a community.

> **Preferred Data Source:**
> http://www.epa.gov/safewater/dwinfo/mo.htm - To see a list of water systems names for your county select **County Name** and Search. A listing of all water systems in the selected county will be generated. Click on any Water System ID number to view specific information concerning violations.

> **Alternate Data Sources:**
> http://www.hud.gov/emaps/ - Healthy Communities Environmental Mapping — **HUD E-MAPS** — is a free Internet service that combines information on HUD's community development and housing programs with EPA's environmental data.

> http://www.fedstats.gov - Select **Regional Statistics**, under **Energy and Environment** select **Environmental State and County Profiles**. Click on State and County, then Submit. Next, click on Drinking Water and Submit.

4f Water Fluoridation

Preferred Data Source:
Contact the Missouri Department of Health and Senior Services – Oral Health Policy Unity at 573-751-6247. Request a map and/or listing of fluoridated water systems and supplies for Missouri. Document provides information on both naturally fluoridated and adjusted water supplies and systems statewide.

Alternate Information Sources:
National Center for Fluoridation Policy and Research – Links to sites with information regarding water fluoridation.

Centers for Disease Control – Oral Health Resources

American Dental Association – Fluoride and Fluoridation

4g Air Quality

Air pollution is hazardous to the health of any community. Individuals already disabled by lung and heart disease are especially likely to be hospitalized when air quality is poor. Young children playing outdoors are also susceptible to the effects of air pollution.

Preferred Data Source:
http://www.dnr.state.mo.us/deq/apcp/homeapcp.htm - Missouri Department of Natural Resources – Air Pollution Control Program. Select **Air Quality Monitoring** (Air Data), then select **Historical Averages**. A map is shown and links below provide detailed information by area and by pollutant. Tables are provided to show yearly information.

Alternate Data Sources:
http://www.hud.gov/emaps/ Healthy Communities Environmental Mapping — **HUD E-MAPS** — is a free Internet service that combines information on HUD's community development and housing programs with EPA's environmental data.

http://www.fedstats.gov - Select **Topic Links**, then scroll down to **E,** then under **Environment** select **Air Quality**. Select **Air Quality Where You Live** and then select **Your Air Quality.**

4h Solid Waste

Solid waste includes food waste, food and beverage containers, construction debris, yard waste, paper and discarded appliances. Landfills are often a good milestone of the rate at which solid waste is generated. Landfills can accommodate only so much solid waste before being considered "full." How quickly, or prematurely, a landfill reaches "full" status is a good indication of the amount of per capita solid waste being produced in a community.

Preferred Data Sources:
Solid Waste Management Districts - Missouri Department of Natural Resources

http://www.dnr.state.mo.us - Select **Land** on the far left of the screen**,** then select **Solid Waste Management Program**. A variety of additional information is available.

Alternate Data Sources:
http://www.epa.gov/swerrims - Office of Solid Waste and Emergency Response

5 Public Safety

5a Homicide Rate

Examining the overall crime rate in the United States provides important information concerning our personal and public safety. Crime data are collected a variety of different ways, through officially recorded data gathered by various local and federal agencies, as well as through self-reported criminal involvement, and victimization surveys like the National Crime Victimization Survey.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**, and then **Homicide and Legal Intervention.**

Alternate Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Police Reports** select **Violent Crimes,** available for school years 1998, 1999, 2000**.**

Alternate Data Source:
http://www.fedstats.gov/qf/states/29000.html - Select **County** then scroll to the bottom of the page and select **Browse more data sets,** then select **Crimes reported to police**. FEDSTATS tracks economic and population trends, health care costs, aviation safety, foreign trade, energy use, farm production, and more. Access official statistics collected and published by more than 70 Federal agencies without having to know in advance which agency produces them.
Cautions regarding this data

5b Overall Crime Rate

The Uniform Crime Reports (UCR) track seven Index Crimes, which are compiled for the Federal Bureau of Investigation. The numbers are used to monitor the crime level nationwide. The seven categories are murder, assault, rape, robbery, burglary, auto theft and theft. St. Charles Parish reported decreases in five of the seven categories.

Preferred Data Source:
Missouri Crime *Index* is prepared and issued by Department of Public Safety, Criminal Records and Identification Division, Missouri State Highway Patrol Technical Services Bureau, PO Box 568, Jefferson City, Mo 65102 (recorded by county). Not available in electronic format as of May 2001.

5c Violent Crime Rate

It is important to use a public health approach when attempting to decrease violent crime rates in the U.S. A variety of approaches and disciplines are needed when addressing this problem, given that many of the determinants involve social issues, including poverty, poor public education, unemployment rate, mobility, density of housing, family structure, drug trafficking and abuse, juvenile gangs and availability of handguns.

The diversity of its people makes the United States a unique nation. However, when crimes are committed because of our differences, the effects can reverberate beyond a single person or group into an entire community, city, or society as a whole. These crimes, committed because of a bias against race, religion, disability, ethnicity, or sexual orientation, are not limited to cities of a particular size or a region of the country, but occur in communities of all sizes throughout the country.

Preferred Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Police Reports** select **Violent Crimes,** available for years 1998, 1999, 2000**.**

Alternate Data Source: http://www.fedstats.gov/qf/states/29000.html - Select **County** then select **More Data for This Area** and then Select **Crime Reported**. FEDSTATS tracks economic and population trends, health care costs, aviation safety, foreign trade, energy use, farm production, and more. Access official statistics collected and published by more than 70 Federal agencies without having to know in advance which agency produces them.

Alternate Data Sources:
Hate Crime Statistics - On-line publications are available for 1995 – 1999. Select the year of interest to review the file. The data (actual numbers) is provided from reporting jurisdictions. Compilation is by the Federal Bureau of Investigation.

5d Juvenile Crime Rate

It is critical to address the juvenile crime rate population in the U.S. The children and adolescents in this country are our future – it is imperative they grow up in a healthy environment where their physical, social, educational and emotional needs are met. Unfortunately, this is not the reality for many children and youth in the U.S. today. In fact, in 1995, 14.7 million children under the age of 18 lived below the poverty level (US. Bureau of the Census, 1997).

Preferred Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then select **Juvenile Court Referrals,** available for years 1998, 1999, 2000**.**

Alternate Data Source: http://www.dss.state.mo.us/re/jcsar.htm - Statistical information about Missouri's Juvenile Court System. The data tables include county-level, circuit-level and statewide information. You can select from Calendar Years 95 thru 99 in PDF Format. See the index table in this PDF file for exact data and information. You must have adobe Acrobat Reader to open this file.

This material is printed by Department of Social Services, RESEARCH AND EVALUATION Unit at Broadway State Office Building P.O. Box 1527 Jefferson City, MO 65102-1527.

5e Seat Belt / Child Safety Seat Use

Preferred Data Source:
http://www.dhss.state.mo.us /BobCodes/allcodcd.html

Note: The data for the Motor Vehicle Crash Variables and Outcomes for Drivers MICA were developed by linking records for motor vehicle crashes to ambulance trip records, records for hospital admissions and emergency room visits. Linking a driver's crash record to his/her health care records allows one to relate motor vehicle crash characteristics (such as safety belt use, helmet use, crash type etc.) to the severity, type, likelihood and costs of injuries.

These linked files are known as the Crash Outcome Data Evaluation System (CODES). CODES data are developed through a grant from the National Highway Traffic Safety Administration with the help and financial assistance of the Missouri Highway Patrol. Because of the substantial resources required to link and analyze the files, CODES data are only available for 1993 and 1996.

The Missouri Highway Patrol provides the motor vehicle crash records. The Missouri Department of Health and Senior Services own the ambulance and hospital records to which they were linked. Counts of driver records from this MICA may not match those in Highway Patrol publications due to differences in the style and purposes of the publications.

5f Illegal Drug Use

Illegal drug use often carries with it a constellation of other social ills, especially increased criminal behavior as a direct result of illegal drug use or as a means for drug users to procure additional illicit substances. A reduction in drug use should be ultimately indicated by a reduction in the number of illegal drug arrests. Such a reduction may indicate the overall improving health of a community. However, the increase in the number of drug arrests may actually indicate an increased efficiency in law enforcement.

Missouri Crime Summary prepared and issued by Department of Public Safety, Criminal Records and Identification Division, Missouri State Highway Patrol Technical Services Bureau, PO Box 568, Jefferson City, MO 65102 (recorded by county).

Preferred Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Police Reports** review **Police Reports, Corrections,** and other related sections**,** available for years 1998, 1999, 2000**.**

Alternate Data Source:
http://www.dss.state.mo.us/re/jcsar.htm - Statistical information about Missouri's Juvenile Court System. The data tables include county-level, circuit-level and statewide information.

You can select from Calendar Years 95 thru 99 in PDF Format. See the index table in this PDF file for exact data and information. You must have adobe Acrobat Reader to open this file

5g DWI Arrest Rate

Drinking while intoxicated threatens the safety of the driver and other people. A decrease in the DWI arrest rate should indicate a decrease in the prevalence of drivers intoxicated, indicating a generally safer community. Missouri Crime Summary prepared and issued by Department of Public Safety, Criminal Records and Identification Division, Missouri State Highway Patrol Technical Services Bureau, PO Box 568, Jefferson City, MO 65102 (recorded by county).

Preferred Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Police Reports** review **Police Reports,** available for years 1998, 1999, 2000**.**

5h Assault Injury

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Assault Injury.**

Specific types of assault injuries, such as struck by/against; cut/pierce; firearms; spouse/partner abuse; sexual abuse; physical/other abuse; and rape by non-caretaker can be found at DHSS Community Data Profiles - Select **County** and **Assault Injury or** http://www.dhss.state.mo.us/MICA/nojava.html - and then click on Injury 1994-2000.

5i Self- Inflicted Injury

DHSS Community Data Profiles - Select **County** and **Self Inflicted Injury.** Specific types of self-inflicted injuries such as poisoning; cut/pierce; firearms; and suffocate/hang can be found at http://www.dhss.state.mo.us/MICA/nojava.html, and then click on Injury 1994-2000.

6 Family/Domestic Violence

6a Child Abuse & Neglect

Forms of child abuse include physical abuse, neglect, sexual abuse and emotional abuse. Communities can combat child abuse and neglect in several different ways. Communities can implement public awareness activities, parental education and child education programs. Each of these interventions can have an impact on child abuse and neglect within communities.

Preferred Data Source:
http://www.dss.state.mo.us/re/index.htm - Select **Child Abuse and Neglect Annual Report**, and then choose the report you wish to view (Annual reports are available

beginning with 1995). Reports include county level data, as well as definitions and information. Provided by the Department of Social Services, Research and Evaluation Unit, 221 West High Street, PO Box 1527, Jefferson City, MO 65102.

Alternate Data Sources:
http://www.oseda.missouri.edu/kidscount - Select the year you wish to view, view the KCM Outcome Measures by County (under County Profiles section). Select your county and click on the 'Load Table' button. For more information on Kids Count.

DHSS Community Data Profiles Select **County**, then select **MCFH- Child Health**. This document provides a 3-year rate for probable cause child abuse & neglect. Prepared by the Missouri Department of Health and Senior Services, Center for Health Information Management and Evaluation, PO Box 570, Jefferson City, MO 65102.

Child Abuse/Neglect Hotline: 1-800-392-3738

6b Child Out of Home Placement

Preferred Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Juvenile Court Referrals** review **Out-of-home Placements,** available for years 1998, 1999, 2000**.**

Alternate Data Source:
http://www.dss.state.mo.us/re/index.htm - Select **Annual Reports and Statistics, Division of Youth Services Juvenile Court Statistics Report**, then choose the report you wish to view (Annual reports are available beginning with 1995). Reports include county level data, as well as definitions and information. Provided by the Department of Social Services, Research and Evaluation Unit, 221 West High Street, PO Box 1527, Jefferson City, MO 65102.

6c Domestic Partner Violence

Domestic violence is not limited to age, race, culture, marital status, sexual orientation, economic status, or profession. It centers on control, specifically the use of physical assault or threats, sexual assault, intimidation, emotional abuse, psychological abuse, economic abuse, social isolation, or stalking to control the victim.

Preferred Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Police Reports** review **Domestic Violence,** available for years 1998, 1999, 2000**.**

Alternate Data Source:
http://www.dhss.state.mo.us/MICA/nojava.html **MICA**. Under the **Injuries 1994 - 2000**, choose Abuse-Neglect-Rape. Choose Abuse-Neglect-Rape again and then Spouse/Partner Abuse. This **MICA** allows you to generate a table for specific cause categories, categorized by Year, Age Group, Sex, Race, Patient Type and County or Zip code.

Missouri Crime Index prepared and issued by Department of Public Safety, Missouri State Highway Patrol Technical Services Bureau, Criminal Records and Identification Division, PO Box 568, Jefferson City, MO 65102.

6d Elder Abuse and Neglect

Elder abuse can range from physical, financial, emotional, or sexual abuse, to neglect. Perpetrators of elderly abuse are most often caregivers. Currently, most states have implemented mandatory reporting of elderly abuse. Interventions for elder abuse should focus on public awareness of the issue and reporting laws.

Preferred Data Source:
http://www.dhss.state.mo.us - Select **Senior Services** then select **Missouri Elder Abuse, Neglect and Exploitation Annual Report**. Select **Fiscal Year 2000 report**. See the index table in this PDF file for exact data and information needed. You must have adobe Acrobat Reader to open this file

Elderly Abuse or Neglect Hotline: 1-800-392-0210

7 Unintended Injury

7a Work-related Injuries

In 1994 work injuries alone cost $121 billion in medical expenses and lost productivity and wages. The Director of the National Institute for Occupational Safety and Health (NIOSH) began emphasizing that occupational injury and disease caused needless human suffering, burden health care resources, and drain U.S. productivity. In 1994, employers reported 6.3 million disabling work injuries and 514,700 cases of occupational illnesses.

Resulting in Death: Indicator Definition

Preferred Data Source:
DHSS Community Data Profiles - Select **County**, and **Cause of Death**, and then **Injuries at Work**.

Nonfatal Injuries - Nonfatal occupational injuries are defined as involving one or more of the following: loss of consciousness, restriction of work or motion, transfer to another job, or medical treatment (other than first aid). An occupational injury is defined as an injury, such as a cut, fracture, sprain, strain, amputation, etc., that results from a work event or from a single instantaneous exposure in the work environment.
Missouri Department of Labor and Industrial Relations http://www.dolir.state.mo.us/.

The Survey of Occupational Injuries and Illnesses – Provided by: Missouri Department of Labor and Industrial Relations, Research and Analysis Section, 421 East Dunklin Street, P.O. Box 59, Jefferson City, MO 65104-0059.
In Cooperation with: U.S. Department of Labor Bureau of Labor Statistics.

Additional Information:
Missouri Department of Health and Senior Services - Division of Environmental Health and Communicable Disease Prevention.
Missouri Census of Fatal Occupational Injuries (MOCFOI) Federally funded surveillance program for workplace fatalities.
Missouri Occupational Fatality Assessment and Control Evaluation (MOFACE) Federally funded program that documents, investigates and provides preventive recommendations for all occupational fatalities in the state.
For more information, contact the Office of Surveillance at 1-573-751-9071 or 1-800-392-7245.

7b Alcohol-and Drug-related Traffic Accidents

Traffic accidents involving alcohol and drugs are a major public health concern. Each year in the United States there are 123 million traffic related accidents among people impaired by alcohol or drugs. Injuries sustained from these accidents are the leading cause of death in individual's aged 1 to 34.
Missouri Department of Health and Senior Services Defines Alcohol Use as a citation for alcohol use and based on the judgment of the investigating officer that alcohol use contributed to the crash.

Preferred Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Deaths** review **Alcohol Related Deaths, Drug Related Deaths,** available for years 1998, 1999, 2000**.**

Alternate Data Source:
Alcohol-Related Traffic Accidents: http://www.dhss.state.mo.us - Select **Data and Resources**. Select MICA, and then select Motor Vehicle Crash & Outcomes – 1993 & 1996. Identify 'Alcohol' as either the column or the row variable.

Note: The data for the Motor Vehicle Crash Variables and Outcomes for Drivers MICA were developed by linking records for motor vehicle crashes to ambulance trip records, records for hospital admissions and emergency room visits. Linking a driver's crash record to his/her health care records allows one to relate motor vehicle crash characteristics (such as safety belt use, helmet use, crash type etc.) to the severity, type, likelihood and costs of injuries.
These linked files are known as the Crash Outcome Data Evaluation System (CODES). CODES data are developed through a grant from the National Highway Traffic Safety Administration with the help and financial assistance of the Missouri Highway Patrol. Because of the substantial resources required to link and analyze the files, CODES data are only available for 1993 and 1996.

The Missouri Highway Patrol provides the motor vehicle crash records. The Missouri Department of Health and Senior Services own the ambulance and hospital records to which they were linked are owned by the Missouri Department of Health and Senior Services. Counts of driver records from this MICA may not match those in Highway Patrol publications due to differences in the style and purposes of the publications.

Users of this MICA are encouraged to obtain the Missouri Crash Outcome Data System (CODES) reports for 1993 and 1996. These reports contain a more complete explanation of the development of the files as well as data not contained in the MICA

   ** [[Department of Public Safety, Missouri State Highway Patrol, Statistical Analysis Center, 1510 East Elm, Jefferson City, MO 65101, 573/751-9000, 1997 Missouri Traffic Safety Compendium.]] **

Prevalence of DWI in Missouri - select '**Drinking Involvement in Missouri Crashes'** – County specific information is provided near the end of the report. Provided by Missouri Department of Mental Health, Division of Alcohol and Drug Abuse, 1706 East Elm, PO Box 687, Jefferson City, MO 65102, 573-751-7093.

7c Motor Vehicle Accident Injuries

The Department of Transportation's National Highway Traffic Safety Administration can take a measure of credit for the reduction in highway fatalities through a variety of intervention programs that increase the use of safety belts, child restraints, and motorcycle helmets, and reduce the incidence of drinking and driving.

Preferred Data Source:
DHSS Community Data Profiles Select **County** and **Unintentional Injury**. Information includes deaths, hospitalizations and emergency room visits.

   Definitions:
   Motor Vehicle1   Motor Vehicle2   Risk Factors   Intervention Strategies

7d Unintentional Injuries

Unintentional injuries are injuries that occur without harmful intent. With each unintentional injury there is a potential risk of quality of life loss. Some injuries such as head and spinal cord injuries can cause a lifetime of suffering and disability. Measures to reduce the incidence of unintentional injuries are needed.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Unintentional Injury**. Information includes deaths, hospitalizations and emergency room visits.   Specific types of injuries such as falls; struck by/against; motor vehicle; cut/pierce; and overexertion can be found at DHSS Community Data Profiles - Select **County** and **Unintentional Injury or** http://www.dhss.state.mo.us/MICA/nojava.html and then click on Injury 1994-2000.

Definitions: Unintentional Injury   Also included on this page are links to definitions for specific types of unintentional injuries.

7e Firearm Injuries

DHSS Community Data Profiles - Select **County** and **Unintentional Injury**. Information includes deaths, hospitalizations and emergency room visits.

Definitions: Of Indicator   Of Condition
Risk Factors   Intervention Strategies   Scientific Studies and Reports

8 Maternal & Child Health

8a Unintended Pregnancies

      Preferred Data Source:
      DHSS Community Data Profiles - Select **County** and **MCFH- Maternal**
      Preconception/Family Planning.

      Provided by the Missouri Department of Health and Senior Services, Center for Health
      Information Management and Evaluation, PO Box 570, Jefferson City, MO 65102.

      Definitions: Of Indicator
      Scientific Studies and Reports

8b Smoking During Pregnancy

      Birth certificate data does not define smoking with set parameters of amount. A woman is
      positive for smoking if she smoked any cigarettes during pregnancy. The average number of
      cigarettes smoked is recorded on the birth certificate. Smoking during pregnancy is self
      reported on the birth certificate.

      Preferred Data Source:
      DHSS Community Data Profiles - Select **County** and **MCFH- Maternal Prenatal**.

      Definitions: Of Indicator
      Scientific Studies and Reports

8c Immunization Rate

      Children are one of the more vulnerable segments of the population in terms of illness, due
      to their immature immune systems. Yet, many life threatening childhood diseases are
      preventable if children are fully immunized. Increasing the availability of health care and
      public education are possible measures to increase the immunization rate.

      Preferred Data Source:
      DHSS Community Data Profiles - Select **County** and **MCFH- Child Health.**

      For More Information
      Missouri Department of Health and Senior Services, Division of Environmental Health and
      Communicable Disease Prevention, Section for Vaccine Preventable and Tuberculosis
      Disease Elimination, 930 Wildwood Drive, PO Box 570, Jefferson City, MO 65102, 1-800-
      699-2313.

8d Low Birth Weight

Low and very low birth weight babies require special equipment and intensive care, depending on the extent of their complications and their size at birth. A very small baby may require a hospital stay of months and require constant attention. This care is very costly. In addition to the immediate medical costs, low birth weight children often require special education, early intervention, and other support services later in their lives. In addition, the emotional and financial costs for families of low birth weight children are immense.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH- Infant**.**Health.**

Alternate Sources:
http://www.oseda.missouri.edu/kidscount - Select the **year** you wish to view, view the KCM Outcome Measures by **County** (under County Profiles section). Select your county and click on the 'Load Table' button. For more information on Kids Count.

Definitions: Low Birth Weight   Very Low Birth Weight

8e Birth Defects

Birth defects are congenital defects of body structure or function, likely to result in mental or physical handicap or death.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH – Infant Health** Information includes deaths, hospitalizations and emergency room visits.

Definitions: Of Indicator
Scientific Studies and Reports

8f Number of Births to Teens

Teenage pregnancy is a major community health concern and needs to be addressed. Pregnant teenagers and their unborn infants are at risk for serious health complications as well as financial hardships. Teenage pregnancy can be reduced by interventions to increase abstinence or consistent contraceptive usage among sexually active adolescents.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH- Maternal Preconception/Family Planning.**

Definitions: Of Indicator
Scientific Studies and Reports

8g Births to Women Over 40

Preferred Data Source:

DHSS Community Data Profiles Select - **County** and **MCFH- Maternal Preconception/Family Planning.**

8h Rate of Multiple Births

Data not available.

8i Births to Women Without A High School Education

Preferred Data Source:
DHSS Community Data Profiles Select **County** and **MCFH- Maternal Preconception/Family Planning.**

8j Prenatal Care

Good prenatal care is associated with improved pregnancy outcomes, including more full term pregnancies, fewer growth-retarded infants, fewer low-birth weight babies, and other pregnancy related health issues. The extent to which pregnant women in a community are receiving adequate prenatal care is a good indicator of the overall health of the community and a correlation to potential health issues such as low birth weight babies and their associated health difficulties.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH- Maternal Prenatal**.

8k Repeat Pregnancies Under Age 20

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH- Maternal Preconception/Family Planning**.

Definitions: Of Indicator
Scientific Studies and Reports

8l Birth Spacing Less Than 18 Months

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH- Maternal Preconception/Family Planning**.

Definitions: Of Indicator

8m Child Emergency Room Visits

Preferred Data Source: Emergency Room MICA
http://www.dhss.state.mo.us/EmergencyRoomMICA/ermica.html - Select desired variables, Including age under 15.

8n Cause of Child Hospitalizations

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH- Child Health**.

Alternate Sources: Emergency Room MICA
A Specific listing of Causes for Child Hospitalizations is accessible through MICA at:
http://www.dhss.state.mo.us/EmergencyRoomMICA/ermica.html - Select *Data and Resources*, select *MICA*, and use either *Emergency Room or Inpatient Hospitalization* file.

Definitions: Of Indicator

8o Lead Testing Rates / Percentage Elevated

Preferred Data Source: DHSS Community Data Profiles Select **County** and **MCFH- Child Health** Select **Lead Testing Ages 0-6** and **Blood Lead Elevations, >9mg/dl Ages 0- 6.**

9 Infectious Disease

9a HIV / AIDS

Acquired Immune Deficiency Syndrome (AIDS) is a fatal disease caused by the Human Immunodeficiency Virus (HIV). The virus is spread through contact with an infected person's blood, semen, or vaginal secretions. Unhealthy behaviors such as unprotected vaginal, anal and oral sex, and the sharing of intravenous needles are activities that promote transmission. Trends in AIDS cases reflect technical and methodological factors, changes in survival rates, and differences in the course of the epidemic itself, thus making interpretation of HIV incidence trends difficult.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Infectious Disease**.

Definitions:
Of Indicator   Of Condition   Risk Factors   Intervention Strategies
Scientific Studies and Reports   Community Programs and Resources
State Related Programs

9b Sexually Transmitted Diseases

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Infectious Disease**.

Definitions / Risk Factors / Intervention Strategies:
 Gonorrhea Syphilis Chlamiydia
State and Community Programs and Resources

9c Communicable Disease

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Infectious Disease**.

9d Salmonella

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Infectious Disease.**

Definitions: Of Indicator   Of Condition
Risk Factors   Intervention Strategies
Scientific Studies and Reports
Community Programs and Resources   State Related Programs

9e Tuberculosis

Tuberculosis is an airborne infection that primarily effects the respiratory system. The incidence of tuberculosis can be controlled through education and regular screenings of at risk populations. Patient compliance with medication is also important to reduce drug-resistant strains of the disease.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Infectious Disease**. Review both the 'Active' and 'Infections'.

Missouri Department of Health and Senior Services, Division of Environmental Health and Communicable Disease Prevention, Section of Vaccine Preventable and Tuberculosis Disease Elimination, 930 Wildwood Drive, PO Box 570, Jefferson City, MO 65102, 573/751-6122.

9f Influenza/Pneumonia

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Infectious Disease**.

9g Other Vaccine-preventable Diseases

Vaccines are currently available to prevent several diseases, but unfortunately not everyone is immunized. Interventions are needed in all populations to reduce barriers associated with the noncompliance of scheduled vaccinations. Increasing the availability of health care and public education are possible measures to reduce the incidence of vaccine preventable diseases.

Preferred Data Source:
 DHSS Community Data Profiles - Select **County** and **Infectious Disease**. Vaccine preventable diseases on the list include Hepatitis A and Pertussis.

Missouri Department of Health and Senior Services, Division of Environmental Health and Communicable Disease Prevention, Section for Vaccine Preventable and Tuberculosis Disease Elimination, 930 Wildwood Drive, PO Box 570, Jefferson City, MO 65102, 800/699-2313.

9h Hepatitis A

Preferred Data Source:
 DHSS Community Data Profiles - Select **County** and **Infectious Disease**.

9i E-Coli H-0157

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Infectious Disease**.

Definitions: Of Indicator   Of Condition
Risk Factors   Intervention Strategies
Scientific Studies and Reports
Community Programs and Resources State Related Programs
Other Links

10 Nutrition

10a Pregnant Women Achieving Proper Weight Gain

Appropriate weight gain during pregnancy is gaining the amount of weight needed for the woman's pre-pregnancy weight status. The Institute of Medicine (IOM) has developed recommendations for healthy weight gain during pregnancy based upon pre-pregnancy weight status.

How Measured: The amount of weight in pounds gained by a woman from the beginning to end of pregnancy compared against the weight she should have gained based upon her pre-pregnancy weight status.

Preferred Source:
City or County Health Department Pregnancy Nutrition Surveillance System (**PNSS**) because data is based upon pre-pregnancy weight status.

Alternate Data Source:
DHSS Community Data Profiles Select **County** and **MCFH-Maternal Prenatal Weight gain <15 pounds during pregnancy** and **weight gain $\geq$ 45 pounds).**

MICA - Births - Select Data and Resources, then choose MICA. Select

Definitions: Weight Gain < 15 lbs   Weight Gain >45lbs

10b Breast Feeding Rates

How Measured: The percent of mothers who recently gave birth and breastfed their babies in early life (initiation). The percent of mothers who continued to breastfeed their infants until their 6-month birthday (duration).

Preferred Source:
> **Initiation:** State Metabolic Screening Information (**SMSI**) [contact: Missouri Department of Health and Senior Services (MDOH), Division of Nutritional Health and Services (DNHS)] **PNSS**
> **Duration:** Pediatric Nutrition Surveillance System (**PedNSS**)
> **Other Source:** *Initiation and Duration:* Ross Mothers' Survey (Ross) (provides only statewide data

Alternate Data Source: City or County Health Department **PNSS and PedNSS**

10c Potential Eligible being served by WIC

Percent of pregnant women, women who have recently ended a pregnancy, infants and children through age 4 years with a nutritional risk and a low to moderate income who are participating in WIC.

How Measured: The WIC program defines nutritional risk; low to moderate income is defined as an income of $\leq$ 185% of poverty or eligible for selected Department of Social Services (DSS) programs. The number of participants receiving services is compared to the number of potentially eligible persons as determined USDA through the census data and an estimation factor for the percent at nutritional risk.

Preferred Source: http://www.dhss.state.mo.us/MissouriNutrition

10d Iron Deficiency Anemia among WIC Population

How Measured: Percent of women, infants, and children served by WIC who have hemoglobin or hematocrit values less than a given standard.

Preferred Source: City or County Health Department **PNSS and PedNSS**

10e Obesity

How Measured: Overweight in children is defined as $\geq$ 95th percentile of weight for height of the NCHS/CDC reference. (PedNSS)
At Risk of Overweight: >85th and < 95th percentiles of BMI – AJCN]

How Measured: BRFSS 1998: Obesity is defined in adults as Females with body mass index (weight in kilograms divided by height in meters squared (w/h^2) $\geq$ 27.3 and males with body mass index $\geq$27.8.

Preferred Sources:
- National Health and Nutrition Examination Survey (**NHANES**)—state data only.
- **PedNSS** for pre-school and school-aged children.
- **PNSS** data for women served by WIC.

[PedNSS and PNSS data available from City or County Health Dept.; schools participating in the school health grant (MSCHS)].

Alternate Data Source:
Behavioral Risk Factor Surveillance System (**BRFSS**) for adults.
Youth Risk Behavior Survey (**YRBS**) for school-aged children. (PDF format).

10f Daily Consumption of Fruits and Vegetables

How Measured: The number of times fruits and vegetables are consumed daily on average.

Preferred Sources:
Food Frequency Questionnaire **(FFQ)** information from WIC participants and school-aged children.
BRFSS and **YRBS** (PDF format) **Local** WIC agency; schools participating in the school health grant (MSCHS).

Alternate Sources:
Continuing Survey of Food Intakes by Individuals (**CSFII**)—national data only.

10g Senior Nutrition Sites

How Measured: The number of senior nutrition sites offering congregate and home-delivered meals. Sites funded through the Older Americans' Act (OAA). (287 Senior Nutrition Sites in Missouri).

Preferred Source: http://www.dhss.state.mo.us/Senior_Services/guide00/hcs/scenter.htm
Call the number listed for more information.

10h Participation in Food Assistance Programs

Indicator:
- The number or percent of people or families using or not using available nutrition or food assistance programs.
- The number of meals served by selected programs through contracts with local providers.
- The number of meals provided directly by the DOA.

Preferred Sources:
1. Nutritional programs
2. Summer Food Service Program (**SFSP**)
3. Child and Adult Food Care Program (**CACFP**)
4. Supplemental Nutrition Program for Women, Infants, Children (**WIC**)
5. Senior Center Congregate Meals
6. Senior Center Home-Delivered Meals
7. DOA Home-Delivered Meals
8. Hunger Prevention Programs
9. Food Stamps
10. Emergency Food Assistance, such as Food Pantries, Soup Kitchens, etc.

11. Farmers market nutritional educational program
12. Seniors farmers market nutritional educational program
13. National school lunch, breakfast, and milk program

Alternate Data Source:
U.S. Conference of Mayors
Food Pantry Associations
Area Food Banks, Area Churches, United Way, etc.

10i Percentage of individuals with cardiovascular disease eating low fat diet

Preferred Data Source: BRFSS

10j Percentage of individuals with cardiovascular disease exercising more

Preferred Data Source: BRFSS

10k Percentage of individuals that have been diagnosed with diabetes

Preferred Data Source: BRFSS

10l Percentage of babies born with neural tube defects or spina bifida

Preferred Data Source: DHSS Community Data Profiles - Select **County** and **MCFH-Infant Health**

11 Chronic Disease

11a Smoking Rates (teens and adults)

See County Chronic Disease Prevention and Health Promotion Indicator References sent by the Department of Health and Senior Services's Division of Chronic Disease Prevention and Health Promotion in August 2001.

11b Sedentary Lifestyle / Physical Activity

See County Chronic Disease Prevention and Health Promotion Indicator References sent by the Department of Health and Senior Services's Division of Chronic Disease Prevention and Health Promotion in August 2001.

11c Cause of Hospitalization

Preferred Data Source:
DHSS Community Data Profiles Select **County** and **Hospitalization**. Several chronic diseases are listed.

11d Persons with Functional Limitations

This data is not currently available.

12 Mortality

12a All Cancers

Cancer is a leading cause of morbidity and mortality in the United States. The trends in this long-term disease process vary according to many different factors. A large portion of the increased number of cancer cases are related to growth in the population base as well as the disproportionate growth in the number of older adults. Racial and ethnic groups also exhibit differences, with the black population at relatively high cancer risk. Major cancer control activities are being implemented in order to reduce the likelihood of developing cancer.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**.

Alternate Data Source:
Cancer MICA http://www.dhss.state.mo.us/CancerMICA/index.html

Definitions: Of Indicator

12b Breast Cancer

Breast cancer is by far the most commonly diagnosed cancer in women in the United States and the second leading cause of cancer related deaths. Overall, the mortality rate for breast cancer has continued to decline since 1991. A closer look at the decline in mortality rates reveals that younger women and white women have the greatest reduction in breast cancer deaths. The lowest reduction is seen in African American women. The mortality rate decline can be explained by an increase in mammogram usage.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**.

Alternate Data Source: Cancer MICA
http://www.dhss.state.mo.us/CancerMICA/index.html

Definitions: Of Indicator   Of Condition
Risk Factors   Intervention Strategies
Scientific Studies and Research
Community Programs and Resources   State Related Programs

12c Cardiovascular Disease

Cardiovascular disease (CVD) is the number one cause of death in the United States. Lifestyle changes can greatly reduce CVD mortality. Several behaviors have been linked to

an increased risk of CVD including, smoking, obesity, stress, high cholesterol and high blood pressure. Weight loss, a diet low in fat and sodium, smoking cessation, and exercise are useful techniques to prevent the onset of this leading killer.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**.

12d Cerebrovascular Disease (Stroke)

In 1995, there were 158,061 deaths due to cerebrovascular disease in the United States. Over the past two decades, mortality rates have declined by 58 percent, but more work remains to be done. Increasing prevention efforts by focusing on controllable risk factors for cerebrovascular disease such as diet, hypertension, and smoking can be effective at reducing mortality from this condition. Lifestyle modification is a cost efficient means of reducing cerebrovascular disease mortality.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**.

Definitions: Of Indicator
Scientific Studies and Reports

12e Pulmonary Disease (COPD)

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**.

Definitions: Of Indicator

12f Infant Mortality

Infant mortality is the death of an infant in the first year of life. For every 1,000 babies born in the United States each year, 10 will not live beyond their first birthday. Sudden Infant Death Syndrome (SIDS), multiple births, and problems related to premature birth such as low birth weight, are all factors that play a major role in infant death. Efforts to reduce the impact of infant mortality have made some improvement, but more reduction is needed.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH- Infant**.**Health**

Definitions: Of Indicator

Alternate Data Source:
http://www.oseda.missouri.edu/kidscount - Select the year you wish to view, view the KCM Outcome Measures by County (under County Profiles section). Select your county and click on the 'Load Table' button. For more information on Kids Count.

12g Alcohol Related

Alcohol, the most commonly used mood-altering drug in the United States contributes to more than 100,000 deaths annually. Alcohol related death ranks third as a preventable cause of death. It is believed that many alcohol-related deaths are unreported resulting in a lower rate than is actual. Cirrhosis of the liver is a leading cause of alcohol related deaths, contributing to 12 percent of alcohol moralities.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death.** (Alcohol and substance abuse are listed together.)

Definitions: Of Indicator

For More Detailed Data: MICA – Deaths 1990-98
http://www.dhss.state.mo.us/BobCOD/death.html - Under the 'Cause of Injury' section highlight Liver disease/cirrhosis. This MICA allows you to generate a table for specific cause categories, categorized by Year, Age Group, Sex, Race, Patient Type and County or Zip code.

Alternate Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.*
 http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Deaths** review **Alcohol Related Deaths, Drug Related Deaths,** available for years 1998, 1999, 2000.

12h Substance Abuse

Substance abuse is the continued use of a controlled substance for non-medical purposes, despite any problems caused. Twenty thousand people die each year in the United States as the result of illicit drugs. A growing concern of substance abuse is Acquired Immune Deficiency Syndrome (AIDS). Twenty-five percent of individuals with AIDS acquired the disease through intravenous drug use. The sharing of unsanitary syringes for injection purposes transmits the disease among substance abusers.

Preferred Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.* http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Deaths** review **Drug Related Deaths,** available for years 1998, 1999, 2000.

Alternate Data Source:
DHSS Community Data Profiles - Select **County** then select **Cause of Death**. (Alcohol and substance abuse are listed together.)

Definitions: Of Indicator

For More Detailed Data: MICA Deaths 1990-1998
http://www.dhss.state.mo.us/BobCOD/death.html. Under the '**Cause of Injury**' section highlight **Liver disease/cirrhosis**. This MICA allows you to generate a table for specific cause categories, categorized by Year, Age Group, Sex, Race, Patient Type and County or Zip code.

12i Suicide

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**.

Definitions: Of Indicator

Alternate Data Source: *MoDMH – Status Report on Missouri's Alcohol and Drug Abuse Problems for 2002, 8th edition.*
 http://www.modmh.state.mo.us/ada/status/ - Scroll half way to the bottom of the web page and under **County Table Data** select your **County** then under **Deaths** review **Suicides,** available for years 1998, 1999, 2000**.**

12j Unintentional Injury Death Rate

Unintentional injuries are injuries that occur without harmful intent. Falls, drowning, motor vehicle accidents, fires, unintentional firearm injuries, and poisonings are all considered unintentional injuries. In children and adolescents, unintentional injury is the number one leading cause of death in the United States, surpassing all childhood diseases.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**.

Definitions: Of Indicator

12k Child Deaths

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **MCFH - Child Health**. Data is available for 2 age groups (1-14 and 15-19). The definition is the same.

Definitions: Of Indicator

12l Diabetes

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Cause of Death**.

Community Health Improvement Capacity Indicators

13 Health Care System

13a Physician/Patient Ratios

When communities are underserved by primary care physicians, individuals may over utilize emergency medical treatment, which will increase costs, and the community will not be

efficient in preventing disease. Individuals are more likely to be healthier and have better access to care if doctors' offices, hospitals, and other facilities are located near where they live.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Local Public Health- General Information**. Scroll down the page to find both **physicians and registered nurses per population**.

http://www.oseda.missouri.edu/counties/doctors - Physicians 1991 and 1997 listed by State and County.

13b Access to Medicaid Providers

Contact the Department of Health and Senior Services' Health Systems Development Unit in the Center for Health Improvement at 800-891-7415.

13c Access to Dental Services

Contact the Department of Health and Senior Services' Health Systems Development Unit in the Center for Health Improvement at 800-891-7415.

District-level oral health status data is available from DHSS' Oral Health Policy Unit at 573-751-6247. Oral health information is also available from the Association of State and Territorial Dental Directors (ASTDD) http://www.astdd.org/. Information can also be Obtained from the National Maternal and Child Oral Health Resource Center at www.mchoralhealth.org.

13d Access to Mental Health Services

Preferred Data Source:
The Missouri Department of Mental Health – Treatment Centers

13e Availability of Other Health Care Manpower

Contact the Department of Health and Senior Services' Health Systems Development Unit in the Center for Health Improvement at 800-891-7415.

13f Medically Uninsured Population

The cost of medical care has increased over the last century to the point that virtually no one can afford to pay cash for the full amount of care when the need arises. Health insurance is any plan for the full or partial payment of health care expenses by a third party. This can be a company, employer, or a governmental agency. When an individual is uninsured, they may have difficulty getting instant medical treatment to maintain good health, prevent disease, and care for the chronic or catastrophic illness.

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Medicaid Participation**.

DHSS Community Data Profiles - Select – **County** and **MCFH- Child Health**. Data is provided regarding the number of children aged 0-18 estimated to be without insurance and has information on inpatients and outpatients 1-14 and 15-19.

Definitions: Of Indicator

Alternate Data Source:
http://www.census.gov - Choose letter "H", then click on **Health Insurance Data**, then go to **Table E**. Percent of People Without Health Insurance Coverage Throughout the Year by State (3-year Average): 1997 and 1999. Data is state level only.

13g Emergency Medical Services Response Time / Distance to Care

Data is available from DHSS's Bureau of Emergency Medical Services at 573-751-6356.

13h Hospitals in the County

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Hospitals**. A listing is provided. Click on any of the listed facilities to view information regarding services.

13i Nursing Homes

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Nursing Homes**. A table is provided that lists information about each facility.

13j Access to Tertiary Care

Local data

13k Home Health

Local data

13l 911 Service

Local data

13m Reproductive Health Services

Local data

13n Local Enforcement of Laws Regarding Tobacco Sales to Minors

Local data

13o Public Transportation

Local data

14 Community Health Resources

14a Recreational/Exercise Facilities/Opportunities

Local data

14b Drug and Alcohol Treatment

Department of Mental Health – Division of Alcohol and Drug Abuse. The division plans and funds prevention, treatment and rehabilitation programs for an illness that costs the state's economy more than $3 billion a year in lost productivity, social welfare costs, and property damage. It is estimated that more than 259,000 Missourians are in need of treatment services for alcohol and other drug abuse.

Preferred Data Source:
Directory of Service Provides - Searchable database to identify providers.

14c Smoking Cessation

Local data

14d Health Education Opportunities

Local data

14e Wellness/Prevention Programs

Local data

14f Summer Feeding Sites

Call the Department of Health and Senior Services' **Bureau of Community Food and Nutrition Assistance** at 888-435-1464 for this data**.**

14g Services for those with Physical Disability

Local data

14h Food Pantry Resources

Local data

14i Crisis Centers

Local data

14j Community Coalition/Partnership

Preferred Data Source:
DHSS Community Data Profiles - Select **County** and **Local Public Health-Coalition**. This summary document provides information regarding the existence of a CHART coalition, Caring Communities Partnership, a C-2000 Team and a Community Betterment program. Information is updated annually.

14k School Nurse/Student Ratio

Contact Cheryl Page or Kris Schroer at 573-751-6213 in the Department of Health and Senior Services' Bureau of Family Health for this data.